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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (850) 205-8842

: (850)878-5368

Enter the email address for this business entity to be used for future gannual report mailings. Enter only one email address please.**

REGISTERED AGENT CHANGE IGH HOLDINGS, INC.

Certificate of Status	0
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Page Count	03
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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section Division of Corporations			
IGH Holdings, Inc. SUBJECT:			
Name of Corporation			
DOCUMENT NUMBER:			
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Brad Crouch			
Name of Contact Person			
Inmark, LLC			
Firm/Company			
675 Hartman Rd., Ste. 100			
Address			
Austell, GA 30168			
City/State and Zip Code			
bradc@inmarkinc.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Brad Crouch 770 373-3324			
Name of Contact Person at () Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Amendment Section Street Address: Amendment Section			
Division of Corporations Division of Corporations			
P.O. Box 6327 Clifton Building			
Tallahassee El 32314 2661 Evenutive Center Cimle			

Tallahassee, FL 32301

CR2B045 (03/12)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

		2, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
		tion organized under the laws of the State of Georgia e or registered agent, or both, in the State of Florida.
	0 0 2	
1. The name of	the corporation: IGH Holdings, I	Inc.
2. The principa	l office address: 675 Hartman Rd	l, Suite 100, Austell, GA 30168
3. The mailing	address (if different):	
4. Date of incom	rporation/qualification: 10/15/20	Document number: F10000004549
5. The name an		egistered agent and registered office on file with the
•	Corporation Service Company	
	1201 Hays St.	
	Tallahassee, FL 32301	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
	C T Corporation System	23
	c/o C T Corporation System, 12	00 South Pine Island Road
		O. Box NOT acceptable
	Plantation, Florida 33324	
The street addr as changed wil	ress of its registered office and l be identical.	the street address of the business office of its registered agent,
Such change wanthorized by	as authorized by resolution du the board, or the corporation ha	ly adopted by its board of directors or by an officer so is been notified in writing of the change.
Thomas	Anderson are of an officer or director	Thomas Anderson, Asst. Secretary Frinted or typed name and title
I hereby accep I further agree performance o agent. Or, if to hereby confirm	t the appointment as registered to comply with the provisions f my duties, and I am familiar v his document is being filed mer v that the corporation has been	d agent and agree to act in this capacity, of all statutes relative to the proper and complete with and accept the obligation of my position as registered ely to reflect a change in the registered office address, I notified in writing of this change.
By: CTCo	rporation System	08/17/2016
	gnature of Registered Agent	Date
If signing on b	ehalf of an entity:	·
Michael	Seraphin Asst. Secretary	
	Typed or Printed Name	

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)